

## FAX TRANSMISSION

April 16, 2002 DATE:

PTO IDENTIFIER:

See Attachment A **Application Number** 

Patent Number

Inventor:

See Attachment A

MESSAGE TO:

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See attached

PAGES (Including Cover Sheet):

CONTENTS:

Enclosed please find a Revocation of Power of Attorney and a new Power of Attorney for the above applications. Please call the above-listed Applicant's attorney if there are any questions.

If your receipt of this transmission is in error, please notify this firm immediately by collect call to (617) 951-7173 and send the original transmission to us by return mail at the address below.

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